

NO700001184

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10 MAY 24 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

Amey
5/25/10
TL

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BNI Referrals Unlimited Group Inc.

DOCUMENT NUMBER: N07000011184

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pamela Pangas

(Name of Contact Person)

(Firm/ Company)

PO Box 880502

(Address)

Port Saint Lucie, FL 34988

(City/ State and Zip Code)

ppangas@bankUnited.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Pamela Pangas

(Name of Contact Person)

at (561) 723-3826

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

BNI Referrals Unlimited Group Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

NO7000011184

(Document Number of Corporation (if known))

APPROVED
AND
FILED
10 MAY 24 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

n/a

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

Pamela Pangas

7526 South US Hwy 1, Ste. 1-A

Port Saint Lucie, FL 34952

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

PO Box 880502

Port Saint Lucie, FL 34988

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Pamela Pangas

7526 South US Hwy 1, Ste. 1-A

New Registered Office Address:

(Florida street address)

Port Saint Lucie

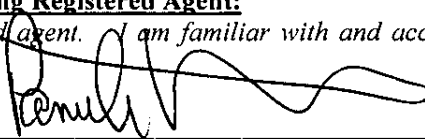
(City)

Florida 34952

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing



If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Pres</u>	<u>Lee Palmer</u>	<u>200 West Glen</u> <u>Fort Pierce, FL 34981</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VP</u>	<u>Dave Moberly</u>	<u>501 SE Port St. Lucie Blvd</u> <u>Port St. Lucie, FL 34984</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Sec/Treas</u>	<u>Scott Mateer</u>	<u>130 SW Port St Lucie</u> <u>Port St. Lucie, FL 34984</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

n/a



(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Pres	Robert D. Allen Jr.	729 SW Great Exuma Cove Port St. Lucie, FL 34986	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VP	Jessica Diaz	1250 SE Port St. Lucie Blvd Port St. Lucie, FL 34952	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Sec/Treas	Pamela Pangas	7526 South US Hwy 1, Ste. 1-A Port St. Lucie, FL 34952	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

(attach additional sheets, if necessary). (Be specific)

n/a



The date of each amendment(s) adoption: 05/1/2010

(date of adoption is required)

Effective date if applicable: 05/01/2010

(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 5/16/10

Signature Pamela Pangas Sec/Treas.

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Pamela Pangas

(Typed or printed name of person signing)

Sec/Treasurer

(Title of person signing)

AP